UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRIT	TE IN THIS SPACE
Case	Date Filed
27-CA-096728	01-18-13

INSTRI	CT	CAL	ο.

	R AGAINST WHOM CHARGE IS BROUGHT	
a Name of Employer		b. Tel. No 719-539-0800
Hampton Inn & Suites		c. Cell No.
		C. Cell No.
		f Fax No.
Address (Street, city, state, and ZIP code)	e Employer Representative	
785 E. Highway 50	T.J.	g. e-Mail
Salida, CO	General Manager	
31201	V .	h Number of workers employed ~50
Type of Establishment (factory, mine, wholesaler, etc.) Hotel) Identify principal product or service Hotel	
The above-named employer has engaged in and is engag	ung in unfair labor practices within the meaning of	section 8(a), subsections (1) and (list
subsections)		the second secon
		abor Relations Act, and these unfair labo
practices are practices affecting commerce within the mea within the meaning of the Act and the Postal Reorganization	그리고 그렇게 가는 그 사람들이 가는 그 살아 가는 것이 되었다. 그 그리고 하는 그리고 하는 것이 없는 것이 되었다고 하는 것이 없다.	unfair practices affecting commerce
		r practicos)
. Basis of the Charge (set forth a clear and concise stateme	ent of the facts constituting the alleged untall labor	produces)
(b) (6) (b) (7)(C)		
About (b) (6), (b) (7)(C) 2013, I was terminated from m	ny employment as a result of complaints	I made on behalf of myself and
coworkers, about non-navment of wanes, cutting	hours and changing schedules	
coworkers, about non-payment of wages, cutting	g hours, and changing schedules.	J.
coworkers, about non-payment of wages, cutting	g hours, and changing schedules.	i-
coworkers, about non-payment of wages, cutting	g hours, and changing schedules.	
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coworkers, about non-payment of wages, cutting	g hours, and changing schedules.)
coworkers, about non-payment of wages, cutting	g hours, and changing schedules.)- -
coworkers, about non-payment of wages, cutting	g hours, and changing schedules.	- 3
b) (6), (b) (7)(C)	g hours, and changing schedules.	
b) (6), (b) (7)(C) A. Address (Street and number, city, state, and ZIP code)	g hours, and changing schedules.	4b Tel No (b) (6), (b) (7)(C)
b) (6), (b) (7)(C) A. Address (Street and number, city, state, and ZIP code)	g hours, and changing schedules.	
b) (6), (b) (7)(C) B. Full name of party filing charge (if labor organization, give	g hours, and changing schedules.	4b Tel No (b) (6), (b) (7)(C)
b) (6), (b) (7)(C) B. Full name of party filing charge (if labor organization, give	g hours, and changing schedules.	4b Tel No (b) (6), (b) (7)(C) 4c Cell No. 4d Fax No.
b) (6), (b) (7)(C) B. Full name of party filing charge (if labor organization, give	g hours, and changing schedules.	4b Tel No (b) (6), (b) (7)(C) 4c Cell No.
Entil name of party filing charge (if labor organization, give b) (6), (b) (7)(C) I.a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	g hours, and changing schedules. Full name, including local name and number)	4b Tel No (b) (6), (b) (7)(C) 4c Cell No. 4d Fax No. 4e e-Mail
Ecoworkers, about non-payment of wages, cutting by (6), (b) (7)(C) Sea. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) Sea. Full name of national or international labor organization of	g hours, and changing schedules. Full name, including local name and number)	4b Tel No (b) (6), (b) (7)(C) 4c Cell No. 4d Fax No. 4e e-Mail
Evill name of party filing charge (if labor organization, give b) (6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(C)	g hours, and changing schedules. Full name, including local name and number)	4b Tel No (b) (6), (b) (7)(C) 4c Cell No. 4d Fax No. 4e e-Mail
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Ecoworkers, about non-payment of wages, cutting the state of party filing charge (if labor organization, give b) (6), (b) (7)(C) Sa. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) So. Full name of national or international labor organization of organization)	of which it is an affiliate or constituent unit (to be fille	4b Tel No (b) (6), (b) (7)(C) 4c Cell No. 4d Fax No. 4e e-Mail ed in when charge is filed by a labor
Ecoworkers, about non-payment of wages, cutting B. Full name of party filing charge (if labor organization, give b) (6), (b) (7)(C) Id. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) 5. Full name of national or international labor organization organization) 6. DECLARATI	of which it is an affiliate or constituent unit (to be filled)	4b Tel No (b) (6), (b) (7)(C) 4c Cell No. 4d Fax No. 4e e-Mail ed in when charge is filed by a labor
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S. Full name of party filing charge (if labor organization, give b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) 5. Full name of national or international labor organization of organization) 1 declare that I have read the above charge and that the statement (b) (6), (b) (7)(C) By	of which it is an affiliate or constituent unit (to be filled) ION ents are true to the best of my knowledge and belief of (6), (b) (7)(C) An Individual	4b Tel No (b) (6), (b) (7)(C) 4c Cell No. 4d Fax No. 4e e-Mail ed in when charge is filed by a labor Tel. No. (b) (6), (b) (7)(C)
Evill name of party filing charge (if labor organization, give b) (6), (b) (7)(C) Aa. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) 5. Full name of national or international labor organization of organization) 6. DECLARATI I declare that I have read the above charge and that the statement (b) (6), (b) (7)(C)	of which it is an affiliate or constituent unit (to be filled) (O) (6), (b) (7)(C)	4b Tel No (b) (6), (b) (7)(C) 4c Cell No. 4d Fax No. 4e e-Mail ed in when charge is filed by a labor Tel. No. (b) (6), (b) (7)(C)
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Ecoworkers, about non-payment of wages, cutting by (6), (b) (7)(C) Ta. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) To Full name of national or international labor organization of organization) (c) (b) (6), (b) (7)(C) (d) (6), (b) (7)(C) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	of which it is an affiliate or constituent unit (to be filled) ION ents are true to the best of my knowledge and belief of (6), (b) (7)(C) An Individual	4b Tel No (b) (6), (b) (7)(C) 4c Cell No. 4d Fax No. 4e e-Mail Tel. No. (b) (6), (b) (7)(C) Office, it any, Cell No.

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

27-CA-097024 01-24-13

6110 FIRESTONE BLVD, FIRESTONE, CO 80520 Type of Establishment (factory, nursing home, j. lotel) procery store The above-named employer has engaged in and is elational Labor Relations Act, and these unfair labor processes are unfair practices affecting commerce within	ractices are practices affecting comment in the meaning of the Act and the Posta	b. Tel. No. (303)682-4160 c. Cell No. f. Fax No. g e-Mail h Dispute Location (City and State) Firestone, CO k. Number of workers at dispute location approx. 30 he meaning of section 8(a), subsections (1) of the ca within the meaning of the Act, or these unfair labor
6110 FIRESTONE BLVD, FIRESTONE, CO 80520 Type of Establishment (factory, nursing home, otel) procery store gr The above-named employer has engaged in and is elational Labor Relations Act, and these unfair labor priractices are unfair practices affecting commerce within	Principal Product or Service rocery items engaging unfair labor practices within the actioes are practices affecting comments the meaning of the Act and the Posta	f. Fax No g e-Mail h Dispute Location (City and State) Firestone, CO k. Number of workers at dispute location approx. 30 he meaning of section 8(a), subsections (1) of the
6110 FIRESTONE BLVD, FIRESTONE, CO 80520 Type of Establishment (factory, nursing home, potel) grocery store The above-named employer has engaged in and is enverted to the second of the proportion of the second	Principal Product or Service rocery items engaging unfair labor practices within the actioes are practices affecting comments the meaning of the Act and the Posta	g e-Mail h Dispute Location (City and State) Firestone, CO k. Number of workers at dispute location approx. 30 le meaning of section 8(a), subsections (1) of the
Type of Establishment (factory, nursing home, open) procery store grant	rocery items engaging unfair labor practices within the ractices are practices affecting commen in the meaning of the Act and the Posta	h Dispute Location (City and State) Firestone, CO k. Number of workers at dispute location approx. 30 ne meaning of section 8(a), subsections (1) of the
notel) procery store gr The above-named employer has engaged in and is e National Labor Relations Act, and these unfair labor processors are unfair practices affecting commerce with	rocery items engaging unfair labor practices within the ractices are practices affecting commen in the meaning of the Act and the Posta	Firestone, CO k. Number of workers at dispute location approx. 30 ne meaning of section 8(a), subsections (1) of the
notel) procery store gr The above-named employer has engaged in and is e National Labor Relations Act, and these unfair labor processors are unfair practices affecting commerce with	rocery items engaging unfair labor practices within the ractices are practices affecting commen in the meaning of the Act and the Posta	approx. 30 ne meaning of section 8(a), subsections (1) of the
The above-named employer has engaged in and is e National Labor Relations Act, and these unfair labor pro- practices are unfair practices affecting commerce with	engaging unfair labor practices within the ractices are practices affecting comment in the meaning of the Act and the Posta	
National Labor Relations Act, and these unfair labor proportions are unfair practices affecting commerce with	ractices are practices affecting comment in the meaning of the Act and the Posta	
Since on or about (b) (b) (7)(C) 2013, the attemptoyees in the exercise of their Section employee (b) (6), (b) (7)(C)	7 rights by its actions including	giving a write-up to and suspending
Full name of party filing charge (if labor organization (b) (6), (b) (7)(C)	, give full name, including focal name a	ind number)
^a (b) (6), (b) (7)(C)	dal	4b Tel. No.
(b) (b), (b) (1)(b)		4c Cell No (b) (6), (b) (7)(C)
		4d Fax No.
		(b) (6), (b) (7)(C)
5 Full name of national or international labor organizationganization)		Tel. No.
I declare that I have read the above charge and the	inat the statements are tibe to the be.	
I declare that I have read the above charge and the	That the statements are true to the be.	V Office if any Call No.
I declare that I have read the above charge and the	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)
6. DECLARATION i declare that I have read the above charge and the laboration (b) (6), (b) (7)(C) (Address: (D) (6), (D) (7)(C) (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C) Print Name and Title Date:	Fax No. (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

FORM EXEMPT UNDER 44 U.S.C. 3512

DO NOT WRIT	E IN THIS SPACE
Case	Date Filed
27-CA-098174	02-12-2013

MICTOR	ICTIONS
IN STREET	11 111 1015

ile an original with NLRB Regional Director for the region in which 1. EMPLOYER	the alleged unfair labor practice occurred or is occurrin AGAINST WHOM CHARGE IS BROUGHT	g.
a. Name of Employer		b. Tel. No. 303 - 779 - 4499
King Soopers, Store # 63		303 - 179 7717 c. Cell No.
		c. Cell No.
	S. Employed Bostonoptishing	f. Fax No.
1. Address (Street, city, state, and ZIP code)	e. Employer Representative	g. e-Mail
8700 2. Hally	Corinne Jowes , store manager	
centennial, (0 80122		h. Number of workers employed
		about 125
Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
supermarket . The above-named employer has engaged in and is engagin	sale of food and general merchandise	tion 9(a) subsections (1) and /list
 The above-named employer has engaged in and is engaging subsections) 		
practices are practices affecting commerce within the mean		or Relations Act, and these unfair labor
within the meaning of the Act and the Postal Reorganization		an practices arresting commerce
2. Basis of the Charge (set forth a clear and concise statemen	nt of the facts constituting the alleged unfair labor pra	actices)
(b) (6), (b) (7)(C) was terminated on/about 2013. It is	s my belief that I was terminated because I	had complained about the lack
(b) (C) (b) (7)(C)	t Store # 63 were receiving from managen	
	그렇게 가는 사람들이 있다면 그렇게 되었다. 나를 하는 사람들이 되었습니다. 그리고 있는 다 사무하네요.	
	n concognitation during the mosting with n	
그렇게 하다 하다 하는데 그는 그들은	n representation during the meeting with r	management, and I was denied
4.1 HOLD HELD HELD HELD HELD HELD HELD HELD HE	n representation during the meeting with r	management, and I was denied
4.1 HOLD NO. 1 -	n representation during the meeting with r	nanagement, and I was denied
4.1 전시, 시작, 시간, 프로그램 프로그램 프로그램 등록 15 (1.1 (1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.	n representation during the meeting with r	nanagement, and I was denied
장애들이 얼마나 있다면 그렇게 하는 것이 얼마나 얼마나 얼마나 얼마나 얼마나 얼마나 얼마나 얼마나 없었다.	n representation during the meeting with r	nanagement, and I was denied
	n representation during the meeting with r	nanagement, and I was denied
the representation.		nanagement, and I was denied
he representation. Full name of party filing charge (if labor organization, give f		nanagement, and I was denied
the representation. Full name of party filing charge (if labor organization, give to b) (6), (b) (7)(C)	full name, including local name and number)	
the representation. B. Full name of party filing charge (if labor organization, give to the file) (6), (b) (7)(C)	full name, including local name and number)	4b. Tel. No. (b) (6), (b) (7)(C)
the representation. B. Full name of party filing charge (if labor organization, give to the file) (b) (6), (b) (7)(C)	full name, including local name and number)	
the representation. B. Full name of party filing charge (if labor organization, give to the file) (b) (6), (b) (7)(C)	full name, including local name and number)	4b. Tel. No. (b) (6), (b) (7)(C)
the representation. B. Full name of party filing charge (if labor organization, give to the file) (b) (6), (b) (7)(C)	full name, including local name and number)	4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No.
the representation. B. Full name of party filing charge (if labor organization, give to the file) (b) (6), (b) (7)(C)	full name, including local name and number)	4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No. 4d. Fax No.
the representation. S. Full name of party filing charge (if labor organization, give file) (6), (b) (7)(C) I.a. Address (Street and number, city, state, and ZIP code) D) (6), (b) (7)(C)	full name, including local name and number)	4b. Tel. No. (b) (6). (b) (7)(C) 4c. Cell No. 4d. Fax No. 4e. e-Mail
the representation. S. Full name of party filing charge (if labor organization, give file) (6), (b) (7)(C) I.a. Address (Street and number, city, state, and ZIP code) D) (6), (b) (7)(C)	full name, including local name and number)	4b. Tel. No. (b) (6). (b) (7)(C) 4c. Cell No. 4d. Fax No. 4e. e-Mail
the representation. Full name of party filing charge (if labor organization, give filing) (b) (6), (b) (7)(C) Tal. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	full name, including local name and number) which it is an affiliate or constituent unit (to be filled in	4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No. 4d. Fax No. 4e. e-Mail n when charge is filed by a labor
he representation. Full name of party filing charge (if labor organization, give filing) (6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(C)	full name, including local name and number) which it is an affiliate or constituent unit (to be filled in	4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No. 4d. Fax No. 4e. e-Mail
he representation. Full name of party filing charge (if labor organization, give file) (6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(C)	full name, including local name and number) which it is an affiliate or constituent unit (to be filled in	4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No. 4d. Fax No. 4e. e-Mail In when charge is filed by a labor Tel. No. (b) (6), (b) (7)(C)
the representation. Full name of party filing charge (if labor organization, give filing) (b) (6), (b) (7)(C) Tal. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	full name, including local name and number) which it is an affiliate or constituent unit (to be filled in	4b. Tel. No. (b) (6). (b) (7)(C) 4c. Cell No. 4d. Fax No. 4e. e-Mail n when charge is filed by a labor
the representation. 3. Full name of party filing charge (if labor organization, give file) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(C)	which it is an affiliate or constituent unit (to be filled in true to the best of my knowledge and belief.	4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No. 4d. Fax No. 4e. e-Mail In when charge is filed by a labor Tel. No. (b) (6), (b) (7)(C)
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the representation. 3. Full name of party filing charge (if labor organization, give filip) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(C)	which it is an affiliate or constituent unit (to be filled in true to the best of my knowledge and belief. (b) (7)(C) nt/type name and title or office, if any)	4b. Tel. No. (b) (6). (b) (7)(C) 4c. Cell No. 4d. Fax No. 4e. e-Mail In when charge is filed by a labor Tel. No. (b) (6). (b) (7)(C) Office, if any, Cell No.

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPORTANT (b) (6), (b) (7)(C) LE 18, SECTION 1001)

INTERNET

FORM EXEMPT UNDER 44 U.S.C. 3512

FORM NLRB-501 (2-08)	NATIONAL LABOR RELATIONS	BOARD	Case		ate Filed	-
	CHARGE AGAINST EMPL	OYER	27-CA-09	77.000 41.7	2-12-13	
ISTRUCTIONS:	The second of the second	7.67730 200.00				
le an original with NLRB R	egional Director for the region in white		M CHARGE IS BROUGH		::	-
a Name of Employer	17. Elli (60 (6)	THOMIST WIND	in chia tac la anticosti	b. Tel. I	No 303-682-4160	-
King Soopers, Inc.				L		- 4
				'c Cell i	Va .	
d Address (Street, city,	state and 7IP rode)	Te Emoloyer R	enresentative	f Fax N	a	
- mores forest, ony,	sides, and the today	2 21191072		g e-Ma	il	
6110 Firestone Bou		Don Keller		1		
Firestone, CO 8050	20	i Store Mana	ger	h. Num	per of workers employ: Approx. 30	bd
Type of Establishment Grocery store	(factory, mme, wholesaler, etc.)	j Identity princ Grocery sal	cipal product or service es		- 2- 2 1000	-
. The above-named em	oloyer has engaged in and is engage	ing in untair labor pr	actices within the meaning of	section 8(a), su	bsections (1) and (list	
subsections) (4)			of the National	Labor Relations	Act, and these unfair l	apor
	s affecting commerce within the ma the Act and the Postal Reorganizat	April 19 Committee of the Committee of t	nese unfair labor practices ar	e unlar practice	s affecting commerce	
2 Basis of the Charge (set forth a clear and concise statem	ent of the facts cons	rituting the alleged unfair labor	or cractices)		-
giving me a write-us nappropriate behav	g date of January 24, 2013) and suspension for engagin rior ng charge (if labor organization, gave	ng in protected c	oncerted activity with m	ny coworkers	about this (6) (6), (6)	(7)(0
b) (6), (b) (7)(C				_r		
a. Address (Street and	number, city, state, and ZIP code)			4b Tel. No	(b) (6), (b) (7)(C)	
(b) (b), (b)	(7)(C)			4c Cell No	(b) (6), (b) (7)(C)	
	-			4d Fax No),	
				4e. e-Mail (b) (6),	(b) (7)(C)	
5 Full name of national organization) N/A	or international labor organization of	of which it is an affilia	te or constituent unit (to be fi	lied in when cha	rge is filed by a labor	
	5 DECLARAT		st of my knowledge and belief.	Tel No	o) (6), (b) (7)(C)	
(b) (6),	(b) (7)(C) (a)		To any moreougn and delicit.	l'atten Ta	n. Call No.	
(-)		b) (6), (b) (7)(C	- an Individual	office if ac	6), (b) (7)(C)	
		(Рипутура лате ал	d title or office, if any)	Fax No	~:	
	3		21.1	e-Mail		_
See above			3/13/1	∃ (b) (6)	, (b) (7)(C)	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 13, SECTION 1001) PRIVACY ACT STATEMENT



UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE Case Date Filed 27-CA-99955 3/7/13

Fax No.

e-Mail

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring. 1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT b. Tel. No. 210-694-1042 a. Name of Employer Harland Financial Solutions, Inc and Harland Financial Services, Inc. Harland Clarke 210-386-2677 f. Fax No. 210-699-4002 d. Address (Street, city, state, and ZIP code) e. Employer Representative g. e-Mail Danielle Hargrove, Esq. 6446 South Kenton Street, Suite 170 Danielle.Hargrove@harlandclr AVP/Corporate Counsel Englewood, CO 80111 h. Number of workers employed Harland Clarke 500+ i. Type of Establishment (factory, mine, wholesaler, etc.) j. Identify principal product or service Financial Services Provider Financial Services k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list subsections) interference and retaliation for engaging in concerted activity of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) (b) (6), (b) (7)(C) was terminated from my employment with Harland Financial Services, Inc. for On (b) (6), (b) (7)(C) 2012. I. having engaged in protected concerted activity, including: I repeatedly advised management at Harland that several employees and I had safety concerns regarding threats that had been made by a terminated employee; I advised management regarding my concerns, as well as other employees' concerns, regarding employment policies that were not being followed; and I advised management about a breach of security involving employee email accounts that also related to safety issues. Full name of party filing charge (if labor organization, give full name, including local name and number) (b) (6), (b) (7)(C) (Street and number, city, state, and ZIP code) 4b. Tel. No. b) (6), (b) (7)(C 4c. Cell No. 4d. Fax No. 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) Tel. No. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. Office, if any, Cell No.

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

INTERNET FORM NURP-901 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case | Date Filed | 27 - CA - 1 0 0 1 5 4 | 0 3 / 1 2 / 2 0 1 3

NSTRUCTIONS:	1	00154 03/12/2013
The an original with NLRB Regional Director for the region in which	the alleged untall labor practice occurred of is a RAGAINST WHOM CHARGE IS BROUG	
a. Name of Employer	CASAINST WHOM CHARGE IS BROOS	b. Tel. No. Phone:(406)2382500
Billings Clinic		
303.2070.00		c. Cell No. n/a
tradical mailtant is	1-6-	f. Fax No. unk.
d. Address (Street, city, state, and ZIP code) 2800 10th Ave N. Billings, Mt 59101	e Employer Representative Mary Ellen James	g. e-Mail
, social real real real real real real real re	Human Resources	mjames@billingsclinic.org
		h. Number of workers employed
		Approximately 1500
Type of Establishment (frictory, mine, wholesaler, etc.) Hospital	 j. Identify principal product or service Health Care 	
k The above-named employer has engaged in and is engage	ng in unfair labor practices within the meaning	of section 8(a), subsections (1) and (fist
subsections) 8(a) (1)	of the Nation	al Labor Relations Act, and these unfair labor
practices are practices affecting commerce within the mea		are unfair practices affecting commerce
within the meaning of the Act and the Postal Reorganization	The same series and the same series and the same series are same s	
2. Basis of the Charge (set forth a dear and condse stateme On or about February 21, 2013, the above name		
conditions of employment with coworkers		writing) not to discuss the terms and
employment was		
,		
3. Full name of party filling charge (if labor organization, give Amy Hauschild	full name, Including local name and number)	
Montana Nurses Association		
4a. Address (Street and number, city, state, and ZIP code)		4b, Tel. No. 406 431 0508
20 Old Montana Highway		4c Coll No
Montana City, Montana		406 431 0508
59634		^{4d Fax No.} 406 442 1841
		4e. c-Mail
		ahauschild@mtnurses.org
5 Full name of national or international labor organization of	which it is an affiliate or constituent unit (to be	filled in when charge is filed by a labor
organization Montana Nurses Association; Nationa	al Federation of Nurses; American Fe	deration of Teachers; AFL-CIO
6 DECLARATIO	NI	Tel, No
I declare that I have read the above charge and that the statemer	its are true to the best of my knowledge and belief.	406 431 0508
1000000	Line shild BON PM Labor Pop	Office, if any, Cell No
(sometimes resorting or person making change)	ny Hauschild BSN RN Labor Rep (Printhypo name and till: or office, if any)	406 431 0508
Control and south a control of the control of the control	to remark the range one of the second to such	Fax No. 406 442 1841
	3-11-17	c-Mail
20 Old Montana Highway Montana City M	t 59634 (date)	- ahauschild@mtnurses.org

VALLEUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

(b) (6), (b) (7)(C)

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

FORM EXEMPT UNDER 44 U.S.C 3512 DO NOT WRITE IN THIS SPACE

CHARGE AGAINST EMPLO	OYER	Case		Date Filed
STRUCTIONS: 27-CA-		27-CA-10	1555	3-29-13
File an original with NLRB Regional Director for the region in which	h the elleged unfeir labor pra	rtice occurred or is occ	curring.	J
1. EMPLOYER	R AGAINST WHOM CHA	RGE IS BROUGHT		
a. Name of Employer Salt Lake County Center for the Arts		Ь. Т	el. No. 801-323-6802	
Can banky definer for the Alle	Salt Lake County Center for the Arts		c. Cell No. 801-599-0692	
			f. Fa	x No.
d. Address (Street, city, state, and ZIP code) 50 West 200 South	e. Employer Represer	itative	g. ø	Mail
Salt Lake City, Ut 84101	\$40 NEW TOLK TOLK TOLK TO THE TOLK TO THE TOLK TO THE TOLK TOLK TO THE TOLK TOLK TO THE TOLK TOLK TOLK TO THE TOLK TOLK TO THE TOLK TOLK TOLK TOLK TOLK TOLK TOLK TOLK		12.5	fy@slco.org
	1		100	umber of workers employed
Type of Establishment (factory, mine, wholosoler, etc.) Theater	j. Identify principal pro	duct or service		~~~
k. The above-named employer has engaged in and is engage		within the meaning of	coction 9/2	cubractions (1) and (list
	ing in unail labor practices	within the meaning or	Secuon o(a)	, subsections (1) and (4st
				ons Act, and these unfair labor
practices are practices affecting commerce within the mee within the meaning of the Act and the Postal Reorganization		feir labor prectices are	a unfair prac	tices effecting commerce
2. Basis of the Charge (set forth a clear and concise stateme	ent of the fects constituting t	he elleged unfeir lebo	r practices)	
요하다 가게 하면 가게 되는 다양하다 하는데 하는데 하는데 하는데 하다 하다 하다 하다 하다 하다. 하는데	states that it is an unfa	The state of the s	P. Carriery	
labor practice for an employer "to not recognize t				
their own affairs." On or about 0.00 (2012 I was			(h) (6)	(b) (7)(C)
their own attairs. On or about	s appointed to a perma	nent position as	(b)	(6) (b) (7)(C) at the
Capitol Theater by the Executive Board of Local	99. On or about Oct. 2	2012 (b) (b), (b)) (1)(C)(-	net with
Salt Lake County Center for the Arts, Theater (b	(b) (b), (b) (7)(C)(b) (c	where d	uring their	visit it was discussed and
agreed by both parties to retroactively implement	t an unsigned "Protoco	of for the selection	of (b)	(6), (b) (7)(C) _{nd}
(b) (6), (b) (7)(C) document specifically and only for the	e newly appointed	oositions.)) (6)	wrote in a statement on
or about Oct. 2, 2012, "I am not accepting the r			pyolyeme	nt takes place and we the
CFA have had an opportunity to review the applic	cante = (b) (6), (b) (7)	Converded this	ompil to	me on Oct 2, 2012
OF A flave flad all opportunity to review the applic	Carità.	Joi warded tins	email to	me on oct. 2, 2012.
(b) (6), (b) (7)(C) party filing charge (if labor organization, give	full neme, including local ne	ime end number)		
			10.27	
4a. Address (Street and number, city, state, and ZIP code)			4b. Tel.	No.
(b) (6), (b) (7)(C)			4c. Cell	No. (b) (6), (b) (7)(C)
			4d. Fa	r No.
			(b) (6). (b) (7)(C)
E Full dans of deliand exists multiple laboration of		12		
Full name of national or international labor organization of organization)	which it is an anniale or con	istituent unit (to be nii	ea in when	charge is med by a labor
6 DECLARATIO	ON!		Tel. No.	
I declare that I have read the above charge and that the statemen	nts are true to the best of my k	nowledge and belief.	10.110	
(b) (6), (b) (7)(C)) (6), (b) (7)(C)	Office, i	any, Cell No.
7	(PrinVtype name and title or	office, if any)	Fax No.	
(b) (6) (b) (7)(C)		03/28/2013	e-Mail	.

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

(date)

FORM EXEMPT UNDER 44 U.S.C. 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case 27 - CA - 102579 Date Filed 4/11/2013

INSTRUCTIONS:	
File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring the second of	ng.
a Name of Employer	b Tel No
Action Target Inc.	801 377 8033
	č Cell No
d Address (Street, city, state, and ZiP code) e Employer Representative	(801) 377-8096
3411 5 Mountain Vista Pluy Kirsten Oler	g e-Maii
Provo, Utah 84606	h Number of workers employed
Type of Establishment (factory, mine, wholesaler, etc.) Identify principal product or service	200 - 250
k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of sec	tion 8(a), subsections (1) and (hst
La transport of the second of	or Relations Act, and these unfair labor
practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are un within the meaning of the Act and the Postal Reorganization Act	fair practices affecting commerce
2 Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor pro	actices)
a) Fired four (4) employees for dispusing their cond	tions of malaines
a) Fired four (4) employees for disgusing their cond on social media, on 3, in a concerted activi	ity.
b) On 3/18/13, forcing the remaining employees to restricting their right to discuss the conditions	orga a paper
restricting their right to discuss the conditions	of their employment,
the urclation being termination, as it relates to	concerted activities.
mutual and protection, and freedom of associat	ron, other protected
activists. 3 Full name of page filing charge (if labor organization, give full name, including local name and number) (b) (6), (b) (7)(C)	4,
4a. Address (Street and number, city, state, and ZIP code)	4b Tel No
(b) (6), (b) (7)(C)	An Collinia
	(b) (6), (b) (7)(C)
	4d Fax No
	(b) (6), (b) (7)(C)
5 Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled organization)	in when charge is filed by a labor
(b) (6), (b) (7)(C) 6. DECLARATION e charge and that the statements are true to the best of my knowledge and belief.	Tel No
(b) (6), (b) (7)(C)	Office, if any, Cell No
son making charge) (Print/type name and title or office, if any)	Fax No
	e-Mail
Address (b) (6), (b) (7)(C) (date) 03 - 7	20-13

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seç. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in 2 of 2 the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB will further explain these uses upon request. Disclosure of this information to the NLRB will further explain these uses upon request. Disclosure of this information to the NLRB will further explain these uses upon request. 3032989879

FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE Date Flied Caso CA-103450 04-23-13

NSTRUCTIONS:	2 -CA	103430	04-23-13	
ile an original with NLRB Regional Director for the region in which	h the alleged unfair labor practice occurred on RAGAINST WHOM CHARGE IS BRO			
a. Name of Employer	AGAINST WHOM CHARGE IS BRO		el. No. (970) 748-9983	
Roundup River Ranch and Serlous Fun Children's Network			(970) 748-9983	
		c C	c Cell No.	
		t Fa	ix No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	2.0		
10 W. Beaver Creek Boulevard	Colleen Rea (for Roundup R	ver) g. e	-Mail	
Avon, CO 81620	Jackson Lewis			
228 Saugatuck Avenue Westport, CT 06880	303-225-2395 Colleen.rea@jacksonlewis.co	m h. h	h. Number of workers employed	
Type of Establishment (factory, mine, wholesaler, etc.) Camp	j. Identify principal product or service Camp for children with chronic	and life-threa		
t. The above-nemed employer has engaged in and is engage				
subsections) Section 7	of the Na	tional Labor Relat	ons Act, and these unfair labor	
practices are practices affecting commerce within the mea within the meaning of the Act and the Postal Reorganization		ces are unfair prec	lices affecting commerce	
2. Basis of the Charge (set forth a clear and concise stateme		ir labor practices)		
	A VOLUME TO STATE OF THE STATE			
on $^{(b)}(6), (b)(7)(C)$ 2012 (b) (6), (b) (7)(C) was	terminated for inquiring about the	(b) (6), (b) (7)(C)	ion at Dayladus Divas	
Sure Sure Sure Sure Sure Sure Sure Sure	terminated for inquiring about the	poli	ies at Roundup River	
Ranch and Serious Fun Children's Network cam	ps and for criticizing actions taken	by Roundup R	iver Ranch's	
management. conduct is protected concerte	d activity because the communica	tions related to	the terms and condition	
of employment.			1073 11000 0100 00 00 00 00	
. Full name of party filling charge (if labor organization, give	full name, including local name and numbe	d		
Paula Greisen, King & Greisen, LLP				
s. Address (Street and number, city, state, and ZIP code)		4b. Tel	No. (303) 298-9878	
670 York Street		-		
Denver, CO 80206		4c. Cell	No.	
		4d. Fax	No. (303) 296-9879	
		40. e-Ma		
		oreise	n@kinggreisen.com	
. Full name of national or international labor organization of	which it is an affiliate as excellenged unit the			
rgenization) N/A	and it is an equippe or constituent mult flo	be misa in when c		
			risige to find by B recor	
declare that I have read the above charge and that the statement	N ts are frue to the best of my knowledge and be	Tel No.	raige to mod by a recor	
(8.()			(303) 298-9878	
		Cana is	(303) 298-9878	
(Signature of popularitelive or person making charge)	ula Greisen, Esq.	Office, if		
	ula Greisen, Esq. (PanViype name and fillo or office, if any)		(303) 298-9878 any, Cell No.	
O I I I I I	(Print/type name and fills or office, if any)	Fex No.	(303) 298-9878	
1670 York St. Denver Co		Fex No.	(303) 298-9878 any, Cell No.	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

(date)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

FORM EXEMPT UNDER 44 U S C 3512

NSTRUCTIONS:	27-	CA-103917	04-29-13
ile an original with NLRB Regional Director for the region in which		The second secon	
	AGAINST WHOM CHARGE IS	BROUGHT	
a. Name of Employer		b.	Tel No. 435-687-2317
ENERGY WEST MINING CO		c	Cell No.
d Address (Street city state and 7/8 ands)	e. Employer Representative	f F	ax No. 435-687-2695
d Address (Street, city, state, and ZIP code) 15 North Main P.O. Box 15	Rick Poulson	g. 6	e-Mail
Huntington, UT 84528		h. d	Number of workers employed 250 to 350
Type of Establishment (factory, mine, wholesaler, etc.) MINE	j. Identify principal product or s COAL	ervice	
subsections) 3 practices are practices affecting commerce within the mea within the meaning of the Act and the Postal Reorganization	ining of the Act, or these unfair labor		tions Act, and these unfair labor ctices affecting commerce
representatives has interfered with, restrained ar Act by harassing, isolating and assigning more of parent Company's internal complaints' hotline, exagreement, and who have been outspoken Union 3. Full name of party filing charge (If labor organization, give INTERNATIONAL UNION UNITED MINE WORK	nerous work to, threatening a xercised their rights under the n supporters.	and discharging em e safety language in	ployees who used the
INTERNATIONAL UNION UNITED MINE WORK	CERS OF AMERICA		
4a. Address (Street and number, city, state, and ZIP code)		4b. Te	^{1. No} 435-637-2037
UMWA DISTRICT 22 525 East 100 South		4c. Ce	l No.
Price, UT 84501		4d F	ax No 435-637-9456
		4e e-1	Mail
5 Full name of national or international labor organization of organization) INTERNATIONAL UNION UNITED M			charge is filed by a labor
6. DECLARATION of the latest that I have read the above charge and that the statement of the latest that I have read the above charge and that the statement of the latest that I have read the above charge and that the statement of the latest that I have read the above charge and that I have read the above charge and that I have read the latest that I have read the above charge and the latest that I have read the above charge and the latest that I have read the latest that I		Tel. Ne and belief.	435-637-2037
By Don for they Do	on Louis Shelley		ıf any, Cell No. 435-650-6622
(signature of persentative or person making charge)	(Print/type name and title or office, if a	(Fax N	435-637-9456
		e-Mail	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

525 East 100 South, Price, UT 84501

Address

April 26,2013

(date)

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE		
Case Date Filed		
27-CA-106607	6-5-13	

File an original of this charge with NLRB Regiona	Director in which the alleged unfair labor practice of	occurred or is occurring
1	EMPLOYER AGAINST WHOM CHARGE IS BROW	JGHT
a Name of Employer		b Tel No
Colorado West Otolaryngologists		(970)245-2400
		c. Cell No
d. Address (street, city, state ZIP code)	e Employer Representative	1 Fax No (970) 242-9092
2643 Patterson Road, Suite 503,	Patrick Howery	g e-Mail
Grand Junction, CO 81506		g e-Mail
		h Disgule Location (City and State)
		Grand Junation CO
Type of Establishment (factory, nursing home,	J Principal Product or Service	k Number of workers at dispute location
hotel)	Health Care	35
Medical		
The above-named employer has engaged in an	d is engaging unfair labor practices within the mean	ing of section 8(a), subsections (1) of the
	or practices are practices affecting commerce within within the meaning of the Act and the Postal Reorg	
	a clear and concise statement of th	ie racis constituting the alleged
unfair labor practices)		
On about (6) (6), (6) (7)(C) 2013, the above	ve-named employer discharged (b)	(6), (b) (7)(C)
		because
engaged in protected concerted a	activity conduct on Face Book.	
	CAST CALL CALL CALL CALL CALL CALL CALL CAL	
3 Full name of party filing charge (if labor organiz (b) (6), (b) (7)(C)	alion, give full name, including local name and num	ber)
4a Address (street and number, city, state, and Z	IP code)	4b Tel No
Tabless (sincer and harrioer, only, state, and 2	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4c Cell No
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)
		4d Fax No
		4e e-Mail
5. Full name of national or international labor orga	nization of which it is an affiliate or constituent unit	
organization) .		the see map in initial energy to more by a loss
1/10		
N/A		
6 DECLARATION	Section 2014 and a section of the section 24	Tel No
I declare that I have read the above charge a	nd that the statements are true to the best of	
(b) (c) (b) (7)		Office if any Cell No
(b) (6), (b) (7)	(b) (6), (b) (7)(C)	(b) (6). (b) (7)(C)
(-) (-), (-) (-)		
(SI		
	Print Name and Title	Fax No
Ac	Print Name and Title Date	Fax No e-Mail
Ac	A STATE OF COMMENTS OF THE PROPERTY OF THE PRO	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT



HTERHET FORMMERSON ,2021

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

EDEMENTING TIMBER IN THE CASE.

DO NOT WRITE IN THIS SPACE Case 27-CA-109904 Date Filed 7-25-13

ils an original with NERB Regional Director for the region in which	n the alleged untair labor practice occurred or is occurr	ring.
	AGAINST WHOM CHARGE IS BROUGHT	b. Tel No (ADE) 265 2211
a Name of Employer		b. Tel No (406) 265-2211
Northern Montana Healthcare		· c Cell No
		Fax No
d Address (Street city state, and EIP code) 30 13th St	e Employer Representative Bonnie O'Neill oneibon@nmhcare.or	'g e-Mail
Havre, Mt		sturbrel@nmhcare.org
	Brenda Sturm	h Number of workers employed 350
Type of Establishment (factory mina, tyholesalar, etc.) Hospital	j Identify principal product or service Healthcare	
k The above-named employer has engaged in and is engagi	ng in unlair labor practices within the meaning of se	ection 8(a), subsections (1) and that
subsections)		bor Relations Act, and these unfair labor
practices are practices affecting commerce within the mea- within the meaning of the Act and the Postal Reorganization	병사 가장에는 1. "네이 ''나타는 장'에는 10 이 대표로 다른데요. '' 다음 10 이 ''나타다'에 다시 아니는 그리고 있다. ''다	infair practices affecting commerce
2 Pasis of the Charge (set forth a clear and concrse stateme	ent of the facts constituting the alleged unfair labor p	practices)
I(SV(3W)SVEAV(a))		(6), (b) (7)(C) because engaged
observer and the Union Representative was una	nary meeting and Union Representation ble to participate in the meeting.	ve was told was only to be an
observer and the Union Representative was una	ble to participate in the meeting.	ve was told was only to be an
observer and the Union Representative was una Full name of party filing charge til labor organization give Arry Hauschild	ble to participate in the meeting.	ve was told was only to be an about the tell No. 406 442 6710
observer and the Union Representative was una 3. Full name of party filing charge til labor organization give Amy Hauschild Montana Nurses Association 4a. Address (Street and number, city, state, and ZIP code) 20. Old Montana Highway	ble to participate in the meeting.	Î de Tal Ma
observer and the Union Representative was una Full name of party filing charge til labor organization give Arriy Hauschild Montana Nurses Association Address (Street and number, city, state, and ZIP code)	ble to participate in the meeting.	4b Tel No 405 442 5710
observer and the Union Representative was una 3. Full name of party filing charge til labor organization give Atmy Hauschild Montana Nurses Association 4a. Address (Street and number, city, state, and ZIP code) 20. Old Montana Highway Montana City, Montana	ble to participate in the meeting.	4b Tel No 406 442 6710 4c Cell No 406 431 0508
observer and the Union Representative was una Full name of party filing charge til labor organization give Amy Hauschild Montana Nurses Association And Address (Street and number, city, state, and ZIP code) 20 Old Montana Highway Montana City, Montana	ble to participate in the meeting.	4b Tel No 406 442 6710 4c Cell No 406 431 0508 4d Fax No 406 442 1841
observer and the Union Representative was una Full name of party filing charge til labor organization give Arry Hauschild Montana Nurses Association And Address (Street and number, city, state, and ZIP code) Old Montana Highway Montana City, Montana 59634	ble to participate in the meeting.	4b Tel No 406 442 6710 4c Cell No 406 431 0508 4d Fax No 406 442 1841 4a e-Mail ahauschild@mlnurses.org
observer and the Union Representative was una Full name of party filing charge til labor organization give Arry Hauschild Montana Nurses Association And Address (Street and number, city, state, and ZIP code) Old Montana Highway Montana City, Montana 59634	ble to participate in the meeting. full name, including local name and number) fivhich it is an affiliate or constituent unit (to be tilled ican Federation of Teachers, AFL-CIO	4b Tel No 406 442 6710 4c Cell No 406 431 0508 4d Fax No 406 442 1841 4a e-Mail ahauschild@mlnurses.org
observer and the Union Representative was una Full name of party filing charge til labor organization give Arriy Hauschild Montana Nurses Association a Address (Street and number, city, state, and ZIP code) 20 Old Montana Highway Montana City, Montana 59634 5 Full name of national or international labor organization of organization) National Federation of Nurses, Amer	ble to participate in the meeting. full name, including local name and number) fivinish it is an affiliate or constituent unit (to be tilled ican Federation of Teachers, AFL-CIO ON: nis are true to the best of my knowledge and belief	4b Tel No 406 442 6710 4c Cell No 406 431 0508 4d Fax No 406 442 1841 4e e-Mail ahauschild@mlnurses.org
Tell name of party filing charge (il labor organization give Arry Hauschild Montana Nurses Association a Address (Street and number, city, state, and ZIP code) 20 Old Montana Highway Montana City, Montana 59634 5 Full name of national or international labor organization of organization) National Federation of Nurses, Americalized that I have read the above charge and that the statement	ble to participate in the meeting. full name, including local name and number) fivhich it is an affiliate or constituent unit (to be tilled ican Federation of Teachers, AFL-CIO	4b Tel No 406 442 6710 4c Cell No 406 431 0508 4d Fax No 406 442 1841 4e e-Mail ahauschild@mlnurses.org 4 in when charge is filed by a labor Tel No 406 431 0508 Office, if any, Cell No.
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WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE. TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

DO NOT WRITE IN THIS SPACE

Case 27-CA-110312

Date Filed 7/31/13

IN	ST	RL	IC.	ПО	NS	i.
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File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT a. Name of Employer b. Tel. No. 303-364-1916 Action Learning Center e. Employer Representative d Address (Street, city, state, and ZIP code) g. e-Mail 551 Norfolkst David Gramaio Aurora, co 8601/ Number of workers employed i. Type of Establishment (factory, mine, wholesaler, etc.) j. Identify principal product or service k The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list subsections) Section 7 Section 8(a)(1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. T (b) (6), (b) (7)(C) was terminated with the reason of "talking negative to co-workers and hope staff." I with others, engaged in concerted a ctivity when expressing cencerns over work place conditions, including non-payment for additional hours being required to attend meetings during planning time, and being required to report on short notice to work oil veterans Day. The school also violated the intereference provision NLRA in attempting to stiff e myself and others from communicative about work conditions. is of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) from communicating about work conditions organization, give full name, including local name and number) 4d. Fax No 4e. e-Mail Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled if organization)

Tel No. 6. DECLARATION ind that the statements are true to the best of my knowledge and belief. (b) (6), (b) (7)(C) an individual (Print/type name and title or office, if any) Fax No. (D) (b), (D) (

7/31/13

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U PRIVACY ACT STATEMENT

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

> 11 07 84

File an original of this charge with NLRB Regiona	Director in which the alleged uniter labor practice t	occurred or is occurring.
	EMPLOYER AGAINST WHOM CHARGE IS BROW	
. Name of Employer Family Smiles		b. Tel. No. (719)564-0990
100 - 1		c. Cell No.
. Address (atreet, city, state ZIP code)	c. Employer Representative	f. Fax No.
1001 S. Pueblo Blvd, Pueblo, CO	Jaime Johnson, Owner	g. e-Mail
81005	James Swanson, Owner	h. Dispute Location (City and State) Pueblo, CO
Type of Establishment (factory, nursing home, otel)	J. Principal Product or Service	k. Number of workers at dispute location
Pental Office	Dental Care	10
Beginning on or about June 17, 2013, employees in response to employees	the Employer, through (b) (6), (b) (7)(C), engaging in protected concerted activities	nterfered with, restrained and coerced s.
in protected concerted activity.	yer, through (b) (6), (b) (7)(C) discharged	
in protected concerted activity. Full name of party filing charge (if labor organiz (b) (6), (b) (7)(C) a. Address (street and number, city, state, and Z	ation, give full name, including local name and num.	⁴⁵ (b) (6), (b) (7)(C)
in protected concerted activity. Full name of party filing charge (if labor organiz (b) (6), (b) (7)(C)	ation, give full name, including local name and num.	45 (5) (6) (7)(C) 46, Cell No. 4d, Fax No.
in protected concerted activity. B. Full name of party filing charge (if labor organize) (b) (6), (b) (7)(C) I.a. Address (street and number, city, state, and Zero) (b) (6), (b) (7)(C)	ation, give full name, including local name and num.	4b. To: No. (b) (6), (b) (7)(C) 4c. Çell No. 4d. Fax No. 4p. p.Mall (b) (6), (b) (7)(C)
in protected concerted activity. Full name of party filling charge (if labor organization) (b) (6), (b) (7)(C) a. Address (street and number, city, state, and Z (b) (6), (b) (7)(C) Full name of national or international labor organization) DECLARATION	ation, give full name, including local name and num.	4b. To: No. (b) (6), (b) (7)(C) 4c. Çell No. 4d. Fax No. 4p. p.Mall (b) (6), (b) (7)(C)
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WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE IR, SECTION 1001)
PRIVACY ACT STATEMENT

				FORM EXEMPT UNDER 44 U S C 351
FORM NLRB-501	UNITED STATES OF AMER NATIONAL LABOR RELATIONS		DO NO	T WRITE IN THIS SPACE
(2-56)	CHARGE AGAINST EMPL		27-CA-11	Date Filed
TRUCTIONS:			27-CA-11	8/9/13
	Regional Director for the region in which	the state of the s	- STREET LINES	wring
Name of Employer	1. EMPLOYER	(AGAINS) WHOM	CHARGE IS BROUGHT	b. Tel No 303-371-7873
dvanced Profes	sional Security			303-371-7673
ia rameda i naida	Julia Godaniy			c Cell No.
				If. Fax No.
. Address (Street, cit	y, slate, and ZIP code)	e Employer Rep	esenialive	1
767 F 39th AVE	, Denver, CO., 80238	unknown		g. e-Mail
	, 00	1 -0:00:00:00		
		North Control		h. Number of workers employed 100+/-
	nt (factory, mine, wholeseler, etc.)		product or service	
ecunity		Guard and Se		
subsections) (3)	mployer has engaged in and is engagi	ing in untair labor pract		
				abor Relations Act, and these unfair labor
	ces affecting commerce within the mea of the Act and the Postal Reorganization		e unialitiecor practices are	unrair practices affecting commerce
Basis of the Charge	(set forth a clear and concise stateme	ont of the facts constitut	mo the elleged unfair labor	conclines)
lince on or about Itering the terms	August 8, 2013 the Employer and conditions of their employing or other mutual aid and pro	ment for engaging	nst its employees by t	Successful (a) to must store straturations
lince on or about Itering the terms	and conditions of their employ	ment for engaging	nst its employees by t	Successful (a) to must store straturations
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Addr

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

DO NOT	WRITE IN	THIS	SPACE

27-CA-111798 8/21/13 tice occurred or is occurring. RGE IS BROUGHT b. Tel No 303-6399243 c Cell No f Fax No tative g e-Mail ector h Number of workers employed about 60 duct or service f life care within the meaning of section 8(a), subsections (1) and (list of the National Labor Relations Act, and these unfair labor air labor practices are unfair practices affecting commerce the alleged unfair labor practices) questioning written procedures and protesting the
b. Tel No 303-6399243 c Cell No f Fax No tative g e-Mail ector h Number of workers employed about 60 duct or service f life care within the meaning of section 8(a), subsections (1) and (list of the National Labor Relations Act, and these unfair labor air labor practices are unfair practices affecting commerce
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g e-Mail Pector h Number of workers employed about 60 duct or service f life care within the meaning of section 8(a), subsections (1) and (list of the National Labor Relations Act, and these unfair labor air labor practices are unfair practices affecting commerce the alleged unfair labor practices)
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or

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

INTERNET

UNITED STATES OF AMERICA

DO NOT WRITE IN THIS SPACE

(2-08) NATIONAL LABOR RELATIONS CHARGE AGAINST EMPI	PARTICIPATION OF THE PARTICIPA	Date Filed 113936 9/23/13
INSTRUCTIONS:		3/23/13
File an original with NLRB Regional Director for the region in whi	ch the alleged unfair labor practice occurred or R AGAINST WHOM CHARGE IS BROI	
a. Name of Employer	Health Care	6 Tel No. 801-687-3421 c. Cell No.
0, 12,	e. Employer Representative	f. Fax No.
6 Address (Street, city, state, and ZIP code) 50 N. Medical Tar.	Moliesa Holl	g. e-Mail
		h. Number of workers employed
i. Type of Establishment (factory, mine, wholesaler, etc.) Healthcare Sorvices	j. Identify principal product or service Health Care	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
k. The above-named employer has engaged in and is enga- subsections) practices are practices affecting commerce within the me- within the meaning of the Act and the Postal Reorganiza	of the Na aning of the Act, or these unfair labor praction	ional Labor Relations Act, and these unfair labor
2 Basis of the Charge (set forth a clear and concise statem 2 USS discharged bed activities.	souse of my prote	octed concorted rights
· I was told not to tal	k to other employ	2 9€
3 Full name of party filing charge (if labor organization, give	e full name, including local name and numbe	r)
4a. Address (Street and number, city, state, and ZIP code)		4b. Tel. No.
(b) (6), (b) (7)	(C)	4 (b) (6), (b) (7)(C)
		4e. e-Mail
5. Full name of national or international labor organization organization) N A	of which it is an affiliate or constituent unit (to	be filled in when charge is filed by a labor
& DECLADAT	ION	Tel No

decla(b) (6), (b) (7)(C ge and that the statements are true to the best of my knowledge and belief.

king charge)

(b) (6), (b) (7)(C) Office, if any, Cell No.

Fax No. e-Mail

9.18.13 (date)

if any)

ID IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE NATIONAL LABOR RELATIONS BOARD Case Date Filed **CHARGE AGAINST EMPLOYER** September 26, 2013 27-CA-114305

File an original of this charge with NLRB Regional D		
a. Name of Employer	MPLOYER AGAINST WHOM CHARGE IS BROUG	BHI b. Tel. No.
Bimbo Bakeries USA		303-396-5324
Diffibo bakeries OOA		333 333 332 .
		c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No. (303)288-7657
7300 Brighton Blvd., Commerce City,	, ,	. ,
CO 80022	Brian Hanson	g. e-Mail
		h. Dispute Location (City and State)
		, Commerce City, Colorado
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)		100
Bakery	Bread	
I. The above-named employer has engaged in and i	s engaging unfair labor practices within the meanin	g of section 8(a), subsections (1) and (3) of
the National Labor Relations Act, and these unfair la		
labor practices are unfair practices affecting comme 2. Basis of the Charge (set forth a clear and concise)		
2. Dasis of the Charge (set forth a clear and concise	e statement of the facts constituting the alleged diffe	all labor practices)
Within the last six –months, the above named emplo	oyer thorough its (b) (6), (b) (7)(C) has hard	assed (b) (6), (b) $(7)(C)$ on account of
(b) (6), (b) (7)(C) protected activities.		
On (b) (6), (b) (7)(c) 2013, the Employer issued (b) (6), (b) (7)(C) a documented verbal discipline on account of	of protected concerted activities.
On (b) (6), (b) (7)(C) 2013. the Employer issued (b) (6), (b)	(7)(C) a written warning on account of protected	ed concerted activities.
		
On (b) (6), (b) (7)(C) 2013, the Employer issued (b) (6), (b)	pro (7)(C) a 3-day suspension on account of pro	tected concerted activities.
3. Full name of party filing charge (if labor organization)	ion, give full name, including local name and numb	er)
(b) (6), (b) (7)(C)		
4a. Address (street and number, city, state, and ZIP	code)	4b. Tel. No. (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		4c. Cell No.
		4e. e-Mail
5. Full name of national or international labor organic	zation of which it is an affiliate or constituent unit (to	
organization)	(,	
6. DECLARATION		Tol No.
I declare that I have read the above charge and	d that the statements are true to the hest of	Tel. No.
my knowledge and belief.	a that the statements are true to the best of	
•		Office, if any, Cell No.
Ву:	(b) (6), (b) (7)(C)	
(cignature of representative or person making abo	arge) Print Name and Title	Fax No.
(signature of representative or person making cha	Date: 9/26/13	e-Mail
Address: (b) (6), (b) (7)(C)	Date. 0/20/10	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

27-CA-114910 October 17, 2013

	Director in which the alleged unfair labor practice of	
	EMPLOYER AGAINST WHOM CHARGE IS BROW	
a. Name of Employer KING SOOPERS		b. Tel No. 303-778-3100
	124 A S. A. C. A.	
d. Address (street, city, state ZIP code) 65 Yuma Street, Denver, CO	e Employer Representative Kathy Moline	f. Fax No.
		g, e-Mail
		h. Dispute Location (City and State) , Denver
i. Type of Establishment (factory, nursing home, hotel)	J. Principal Product or Service	k. Number of workers at dispute location 150
Meat Processing Plant	Meat	100
2. Basis of the Charge (set forth a clear and concident (b) (6), (b) (7)(C) 2013, the above complaints and/or other protected concidents. 3. Full name of party filing charge (if labor organize (b) (6), (b) (7)(C) 4a. Address (street and number, city, state, and Z)	ation, give full name, including local name and num	nfair labor practices) 7)(C) in retaliation for ^{(b)(6)} safety
(b) (6), (b) (7)(C)		4c. Cell No.
		4d. Fax No.
		4e. e-Mail
		(b) (6), (b) (7)(C)
organization)	nization of which it is an affiliate or constituent unit	(to be filled in when charge is filed by a labor
I declare to the my knowl	d that the statements are true to the best of	Tel. No. (b) (6), (b) (7)(C)
Ву.	(b) (6), (b) (7)(C)	Office, if any, Cell No
(signature	arge) Print Name and Title	Fax No.
Address (1) (b) (6), (b) (7)	Date: 10/17/13	e-Mail
(b) (o), (b) (t		(b) (6), (b) (7)(C)
	The second secon	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WE	RITE IN THIS SPACE
Case	Date Filed
27-CA-114964	10-17-13

NSTRUCTIONS:	27-CA-11470	10-17-13
ile an original with NLRB Regional Director for the region in which	the alleged unfair labor practice occurred or is occ	urring.
	AGAINST WHOM CHARGE IS BROUGH	
a. Name of Employer		b. Tel. No. 801-621-6683
Bravo Arts Academy		
		c. Cell No.
	L. Faretonia Parametrialista	f. Fax No.
d. Address (Street, city, state, and ZIP code) 620 East 1700 South	e. Employer Representative Angy Ford, Owner	g. e-Mail
Clearfield, UT 84015	Angy rold, Owner	g. e-iviali
Clearneld, 01 64015		
		h. Number of workers employed
		80+
. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Arts school	Education	
k. The above-named employer has engaged in and is engagi	ng in unfair labor practices within the meaning of	section 8(a), subsections (1) and (list
subsections)	of the National	Labor Relations Act, and these unfair labor
practices are practices affecting commerce within the mea		Control of the contro
within the meaning of the Act and the Postal Reorganization		
Basis of the Charge (set forth a clear and concise stateme		r proctions)
On about 6,(6)(7)(5] 2013, the above-named Empk	oyer, by (b) (6), (b) (7)(C), disciplined i	ts employees because they
engaged in protected concerted activities.		
On about (b) (6), (b) (7)(C) 2013, the above-named En	priover by (b) (6) (b) (7)(C) discharge	ed employee (b) (6), (b) (7)(C)
		ed employee (b) (c), (b) (1)(c)
because engaged in protected concerted activ	viues.	
3. Full name of party filing charge (if labor organization, give (b) (6), (b) (7)(C)	tuli name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP code)		4b. Tel. No.
		13. (4. 7.5.
(b) (6), (b) (7)(C)		V. 6 (W)
(5) (5), (5) (1)(5)		4c. Cell No. (b) (6) (b) (7)(C)
		4c. Cell No. (b) (6), (b) (7)(C)
		4c. Cell No. (b) (6), (b) (7)(C)
		(5) (5), (5) (1), (5)
		(5), (5), (6) (1), (5)
		4d. Fax No. 4e. e-Mail
	which is in an official an analytical with the Co	4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C)
organization) N/A	which it is an affiliate or constituent unit (to be fil	4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C)
	which it is an affiliate or constituent unit (to be fil	4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C)
the second of the contract of		4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) led in when charge is filed by a labor
6. DECLARATIO	DN .	4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C) and that the statement		4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) led in when charge is filed by a labor
(b) (6), (b) (7)(C) and that the statement	DN hits are true to the best of my knowledge and belief.	4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) led in when charge is filed by a labor
(b) (6), (b) (7)(C) and that the statement (b)	ON hits are true to the best of my knowledge and belief.	4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) led in when charge is filed by a labor Tel No.
(b) (6), (b) (7)(C) and that the statement	ON hits are true to the best of my knowledge and belief.	4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) led in when charge is filed by a labor Tel No. Office, if any, Cell No. (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C) and that the statement (b)	ON onto are true to the best of my knowledge and belief. (6), (b) (7)(C)	4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) led in when charge is filed by a labor Tel No. Office, if any, Cell No.
(b) (6), (b) (7)(C) and that the statements	ON onto the best of my knowledge and belief. (6), (b) (7)(C) (Printtype name and title or office, if any)	4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) led in when charge is filed by a labor Tel No. Office, if any, Cell No. (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C) and that the statements	ON onto are true to the best of my knowledge and belief. (6), (b) (7)(C)	4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) led in when charge is filed by a labor Tel No. Office, if any, Cell No. (b) (6), (b) (7)(C) Fax No.

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WE	RITE IN THIS SPACE
Case 27-CA-114978	Date Filed 10-17-13

INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring. 1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT b. Tel. No. a. Name of Employer 524-6560 ABM Janitorial Services f. Fax No. 9800 E GEDDES Ave A-150 Englewood CO-80112 d. Address (Street, city, state, and ZIP code) e. Employer Representativ Juan Martinez g e-Mail h. Number of workers employed approx. 1500 j. Identify principal product or service Type of Establishment (factory, mine, wholesaler, etc.) janitorial services janitorial k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list subsections) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) On about [10] 2013, the above-named Employer interfered with, restrained, and coerced its employees in the exercise of their Section 7 rights by terminating employee (b) (6), (b) (7)(C) for engaging in protected activity. name of party filing charge (if labor organization, give full name, including local name and number) (b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) 4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor Tel. No. ements are true to the best of my knowledge and belief. (b) (6), (b) (7)(C) Office, if any, Cell No. (Print/type name and title or office, if any) Fax No. e-Mail (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

FORM EXEMPT UN	DER 44	U.S.C	3512
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DO NOT WE	RITE IN THIS SPACE
Case	Date Filed
27-CA-115108	10/18/13

ISTRUCTIONS:		7-CA-115108	10/18/13
te an original with NLRB Regional Director for the region in white	th the alleged unfair labor practice R AGAINST WHOM CHARG		
a. Name of Employer		b	Tel. No. 636-250-4225
Semke Grading, LLC			Cell No.
		<u>c</u>	Fax No.
d. Address (Street, city, state, and ZIP code) 5420 Black Walnut Road St. Charles, MO	e. Employer Representativ Von Semke	tu ne u	e-Mail
63301		h.	Number of workers employed ~20
Type of Establishment (factory, mine, wholeseler, etc.) Project at Denver International Airport	j. Identify principal product Equipment Operating		and the later. The specific part is a sequence of the
k. The above-named employer has engaged in and is engage subsections) (3) practices are practices affecting commerce within the mea- within the meaning of the Act and the Postal Reorganization.	ening of the Act, or these unfair i	of the National Labor Rel	ations Act, and these unfair labor
in union activities (b) (6), (b) (7)(C) (ty fling charge (if labor organization, give	tull name, including local name	and number)	200 - 200 (2) - 12
4a. Address (Street and number, city, state, and ZIP code)		4b T	el No (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		4c, C	ell No.
		4d. F	
		4e. e-	ax No
5 Full name of national or international labor organization of organization)		uent unit (to be filted in whe	
(b) (6), (b) (7)(C) CLARATI	f which it is an affiliate or constitu		Mail
		Tel h	Mall n charge is filed by a labor
By	ON onts are true to the best of my know) (6), (b) (7)(C) An Individual	ledge and belief. Office	Mail n charge is filed by a labor
By	ON onts are true to the best of my know	ledge and belief. Office	Mail or charge is filed by a labor (b) (6), (b) (7)(C) or ff any, Cell No.

WILL FUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WELL	E IN THIS SPACE
Case	Date Filed
27-CA-115156	10-18-13

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WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

FORM EXEMPT UNDER 44 U S C 3512

FORM NLRB-501 (2-06) UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WR	TE IN THIS SPACE
Case	Date Filed
27-CA-116072	10/31/13

1. EMPLOYER		rring.
	AGAINST WHOM CHARGE IS BROUGHT	1. 21.
a. Name of Employer		b. Tel. No. 970 925-7523
United States Postal Service		c. Cell No.
Address (Street, city, state, and ZIP code)	e. Employer Representative	f. Fax No. 970-925-5274
235 Puppy Smith Street Aspen CO 81611-9998	Reza Tehrani, OIC	g. e-Mail
		h. Number of workers employed Hundreds of thousands2
Type of Establishment (factory, mine, wholesaler, etc.) Mail Distribution and Delivery	j. Identify principal product or service Same as i	
 The above-named employer has engaged in and is engage subsections. 		
practices are practices affecting commerce within the mea within the meaning of the Act and the Postal Reorganization	ining of the Act, or these unfair labor practices are	abor Relations Act, and these unfair labor unfair practices affecting commerce
2. Basis of the Charge (set forth a clear and concise stateme		aractics of
that to tell ^[0]6] to get a Steward to represent ^[0]6] . i	n 3 investigative interviews.	
	full name, including local name and number)	
a. Address (Street and number, city, state, and ZIP code)	full name, including local name and number)	4b Tel. No 970 963-2608
ea. Address (Street and number, city, state, and ZIP code) PO Box 890	full name, including local name and number)	4c. Cell No. (b) (6), (b) (7)(C)
ea. Address (Street and number, city, state, and ZIP code) PO Box 890	full name, including local name and number)	970 963-2638
ea. Address (Street and number, city, state, and ZIP code)	full name, including local name and number)	4c. Cell No. (b) (6), (b) (7)(C)
ta. Address (Street and number, city, state, and ZIP code) PO 80x 890 Aspen CO 81612-0890 5. Full name of national or international labor organization of	I which it is an affiliate or constituent unit (to be bile	4c. Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 970 963-0956 4e. e-Meil hankgray@sisna.com
4a. Address (Street and number, city, state, and ZIP code) PO Box 890 Aspen CO 81612-0890 5. Full name of national or international labor organization of	which it is an affiliate or constituent unit (to be fille CIO	4c. Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 970 963-0956 4e. e-Meil hankgray@sisna.com
Aa. Address (Street and number, city, state, and ZIP code) PO Box 890 Aspen CO 81612-0890 5. Full name of national or international labor organization of organization) American Postal Worker's Union AFL I declare that I have read the above charge and that the statements	which it is an affiliate or constituent unit (to be fille -CIO ON nts are true to the best of my knowledge and belief, ank Gray, Director Industrial (Relations	4c. Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 970 963-0956 4e. e-Meil hankgray@sisna.com d in when charge is filed by a labor Tel. No. Same as above Office, if any, Cell No. (b) (6), (b) (7)(C)
Aspen CO 81612-0890 5. Full name of national or international labor organization of progenization) American Postal Worker's Union AFL declare that I have read the above charge and that the statements	which it is an affiliate or constituent unit (to be fille CIO ON nts are true to the best of my knowledge and belief,	4c. Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 970 963-0956 4e. e-Meil hankgray@sisna.com d in when cherge is filed by a labor Tel. No. Same as above Office, if any, Cell No. (b) (6), (b) (7)(C) Fex No. Same as above
6. DECLARATION of the shows charge and that the statements of the	which it is an affiliate or constituent unit (to be fille -CIO ON nts are true to the best of my knowledge and belief, ank Gray, Director Industrial (Relations	4c. Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 970 963-0956 4e. e-Meil hankgray@sisna.com d in when cherge is filed by a labor Tel. No. Same as above Office, if any, Cell No. (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

e an original with NLRB Regional Director for the region in which	ch the alleged unfair labor practice accurred or is easily	and the second s
		rring.
a. Name of Employer	R AGAINST WHOM CHARGE IS BROUGHT	b. Tel. No.
Rotech Healthcare		4
Rotecti neathcare		c. Cell No. 307-899-1942
	///pa	f. Fax No.
d Address (Street, city, state, and ZIP code)	e. Employer Representative	
G&G Medical, Inc. 622 Gunnison St.	Aaron Mulkey	g. e-Mail
GJ, CO 81501		aaron.mulkey@rotech.com
33, 00 81301		h. Number of workers employed 4000+
. Type of Establishment (factory, mine, wholesaler, etc.) medical oxygen supplier	j. Identify principal product or service home therapy oxygen supplier and D	DME
The above-named employer has engaged in and is engag	ging in unfair labor practices within the meaning of se	ection 8(a), subsections (1) and (list
subsections)	of the National La	abor Relations Act, and these unfair labo
practices are practices affecting commerce within the me- within the meaning of the Act and the Postal Reorganizati	eaning of the Act, or these unfair labor practices are u	
2. Basis of the Charge (set forth a clear and concise statem	part of the facts constituting the alleged unfair labor	practicae)
On about 6(6)(7)(5) 2103, Rotech Healthcare, by	(b) (b), (b) (7)(C) disciplined me in re	etaliation because I raised
employee complaints about terms and condition	as of employment.	
simple yes complaints about terms and condition	is of chiploymone.	
3. Full name of party filling charge (if labor organization, nive	o full name, including local name and number)	
3. Full name of party filing charge (if labor organization, give	e full name, including local name and number)	
3. Full name of party filing charge (if labor organization, give	e full name, including local name and number)	
(b) (6), (b) (7)(C)	e full name, including local name and number)	.4b. Tel. No
(b) (6), (b) (7)(C)	e full name, including local name and number).	
(a. Address (Street and number, city, state, and ZIP code)	e full name, including local name and number)	4c Cell No. (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code)	e full name, including local name and number)	4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No.
(b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code)	e full name, including local name and number)	4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-Mail
(b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code)	e full name, including local name and number).	4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No.
(b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(C) 5. Full name of national or international labor organization of		4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(C) 5. Full name of national or international labor organization organization)	of which it is an affiliate or constituent unit (to be filled	4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) d in when charge is filed by a labor
(b) (6), (b) (7)(c) 4a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(C) 5. Full name of national or international labor organization organization) 6. DECLARATI	of which it is an affiliate or constituent unit <i>(to be filled</i>	4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(C) 5. Full name of national or international labor organization organization)	of which it is an affiliate or constituent unit <i>(to be filled</i>	4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) d in when charge is filed by a labor
(b) (6), (b) (7)(c) 4a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(c) 5. Full name of national or international labor organization of organization) 6. DECLARATION 1 declare that I have read the above charge and that the statements	of which it is an affiliate or constituent unit <i>(to be filled</i> ION ents are true to the best of my knowledge and belief.	4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) d in when charge is filed by a labor Tel. No. Office, if any, Cell No.
(b) (6), (b) (7)(c) 4a. Address (Street and number, city, state, and ZIP code) 5. Full name of national or international labor organization of organization) 6. DECLARATION 1 declare that I have read the above charge and that the statement (b) (6), (b), (c)	of which it is an affiliate or constituent unit <i>(to be filled</i>) ION ents are true to the best of my knowledge and belief. (b) (6), (b) (7)(C)	4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) d in when charge is filed by a labor Tel. No. Office, if any, Cell No. (b) (6), (b) (7)(C)
5. Full name of national or international labor organization of organization) 6. DECLARATION declare that I have read the above charge and that the statements of the stateme	of which it is an affiliate or constituent unit <i>(to be filled</i> ION ents are true to the best of my knowledge and belief.	4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) d in when charge is filed by a labor Tel. No. Office, if any, Cell No.
(b) (6), (b) (7)(c) 4a. Address (Street and number, city, state, and ZIP code) 5. Full name of national or international labor organization of organization) 6. DECLARATION 1 declare that I have read the above charge and that the statement (b) (6), (b), (c)	of which it is an affiliate or constituent unit (to be filled) ION ents are true to the best of my knowledge and belief. (Print/type name and title or office, if any)	4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) d in when charge is filed by a labor Tel. No. Office, if any, Cell No. (b) (6), (b) (7)(C)
(b) (6), (b) (7)(c) 4a. Address (Street and number, city, state, and ZIP code) 5. Full name of national or international labor organization of organization) 6. DECLARATION 1 declare that I have read the above charge and that the statement (b) (6), (b), (c)	of which it is an affiliate or constituent unit <i>(to be filled</i>) ION ents are true to the best of my knowledge and belief. (b) (6), (b) (7)(C)	4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C) d in when charge is filed by a labor Tel. No. Office, if any, Cell No. (b) (6), (b) (7)(C) Fax No

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

FORM EXEMPT UNDER 44 U.S.C 9512

INTERNET FORM NLR8-501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WE	RITE IN THIS SPACE
Case	Date Filed
27-CA-117228	11-18-13

Tie an original with NLRB Regional Director for the region in white 1. EMPLOYER	R AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer Christian Living Communities		b. Tel. No.
		c. Cell No.
The second secon	e. Employer Representative	f. Fax No.
d. Address (Street, city, state, and ZIP code) 7000 E. Belleview Ave.	Dan Parker	g. e-Mall
Suite 150	Law Carlos	
Greenwood Village, Co. 80111		h. Number of workers employed 550
i. Type of Establishment (factory, mine, wholesafer, etc.) Non Profit	j, Identify principal product or service Reteirement Community	
subsections) practices are practices effecting commerce within the mea within the meaning of the Act and the Postal Reorganizati 2. Basis of the Charge (set forth a cleer and concise staterm	ening of the Act, or these unfair labor practices are ion Act. ent of the facts constituting the alleged unfair labor	practices)
On or about [16,6,77,6] 2013 the Employer disciplir employees complained to management about a	ned employee (b)(0,0)(0)(0) for calling a mee' supervisor's abusive behavior towards e	ting where and 2 other mployees.
On or about (b)(e)(b)(7)(c) 2013, the Employer disciple of a matter where employee (b)(e)(b)(7)(c) was threat		ered witnesses in an investigation
On or about (b) (6), (b) (7)(C) 2013 the Employer disoders that were assigned to [0](5), (0)	scharged ^{(b) (b) (7)(G)} for "creating a team sp	plitting event by not accepting work
Full name of party filing charge (if lebor organization, give (b) (6), (b) (7)(C)	full name, including local name and number)	
4e. Address (Street and number, city, state, and ZIP code)	* 1	4b. Tel. No.
(b) (6), (b) (7)(C)		4c. Cell No. (b) (6), (b) (7)(C)
		4d. Fax No.
		4e. e-Mali (b) (6), (b) (7)(C)
Full name of national or international labor organization of organization)	f which it is an affiliate or constituent unit fo be file	ed in when charge is filed by a lebor
I dev (b) (6), (b) (7)(C) and that the statement	ON ints are true to the best of my knowledge and belief.	Tel, No.
By (b) (b) (c) (b) (c)	6), (b) (7)(C)	Office, if any, Cell No. (b) (6), (b) (7)(C)
(a thereo)	(Print/type name and file or office, if eny)	Fax No.
Address (b) (6), (b) (7)(C)	11/18/2013	6-Mall (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

DO NOT WRITE IN THIS SPACE

FORM EXEMPT UNDER 44 U.S.C.3512

INTERNET FORM NURB 501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST FMPI OVER

FORM EXEMPT UNDER 44 0 2 C 331

CHARGE AGAINST EMPL	OYER	Case	, Date Filed
ISTRUCTIONS:		27-CA-11	7849 : 11-25-13
le an original with NLRS Regional Director for the region in whic			
1 EMPLOYER	R AGAINST WHOM C	HARGE IS BROUGH	There is a second of the second
a Name of Employer			b. Tel No (406) 628-5246
CHS, Inc			6.11 N. 11 M. 11 M
			c Cell No. (406) 281-2532
			f. Fax No.
d. Address (Street, city, state, and ZIP code)	e. Employer Repre	sentative	11. 1
803 Highway 212 South	Ryan Yeager		g. e-Mail
Laurel, MT 59044	Ĭ		Ryan.Yeager@chsinc.com
			h. Number of workers employed
		stock a Nacha Edita	200
Type of Establishmen: (factory, mine, wholesaler, etc.) Refinery	Petroleum prod	product or service fucts	رجال المصودات المناوات المارات المراجات المراجات المراجات
k. The above-named employer has engaged in and is engag	ing in unfair labor practic	es within the meaning of	of section B(a), subsections (1) and (list
subsections) (5)		of the Nationa	Labor Relations Act, and these unfair labor
practices are practices affecting commerce within the mea	And the Annie and the Annie and the second	unfair labor practices a	re unfair practices affecting commerce
2 Basis of the Charge (set forth a clear and concise stateme	ent of the facts constitution	ng the alleged unfair lab	or practices!
The employer has violated the Act by bypassing			
3. Evil name of party filing charge (if labor prosperation, guern	full name, including loca	V name and number	÷ .
 Full name of party filing charge (if labor organization, give United Steelworkers Local 11-443 	ruir name, including loca	i nama and nomber)	
4a. Address (Street and number, city, state, and ZIP code)	encompany is not again the		
Keith Crookston, President			^{4b} Tel. No. (406) 861-7292
3719 W. Old Highway 10 Laurel, MT 59044			4b Tel. No. (406) 861-7292 4c. Cell No.
			(406) 861-7292
			4c. Cell No.
			4c. Cell No. 4d. Fax No. 4e. e-Mail
on all a sure of pulsas a subsectional laboratory laboratory	furbion d is on offit of a one	annelity on the Market	4c. Cell No. 4d. Fax No. 4e. e-Mail crookstonk@gmail.com
5 Full name of national printernational labor organization of organization) United Steel, Paper & Forestry, Rubb			4c. Cell No. 4d. Fax No. 4e. e-Mail crookstonk@gmail.com illed in when charge is filed by a labor
organization) United Steel, Paper & Forestry, Rubb	ber, Mfg , Energy, A		4c. Cell No. 4d. Fax No. 4e. e-Mail crookstonk@gmail.com iiled in when charge is filed by a labor Workers Int'l Union
nonn manting I	oer, Mfg., Energy, A	llied Indus. & Serv	4c. Cell No. 4d. Fax No. 4e. e-Mail crookstonk@gmail.com
United Steel, Paper & Forestry, Rubble 6 DECLARATI declars that I have read the above charge and that the statement (1) (1) (1)	oer, Mfg., Energy, A	llied Indus, & Serv	4c. Cell No. 4d. Fax No. 4e. e-Mail crookstonk@gmail.com iiled in when charge is filed by a labor Workers Int'l Union Tel No. (412) 562-2355 Office, if any. Cell No.
United Steel, Paper & Forestry, Rubble 6 DECLARATE declare that I have read the above charge and that the statement is the statement of the st	oer, Mfg., Energy, A ON only are true to the best of r	llied Indus. & Serv my knowledge and belief Gen. Counsel	4c. Cell No. 4d. Fax No. 4e. e-Mail crookstonk@gmail.com illed in when charge is filed by a labor Workers Int'l Union Tel No. (412) 562-2355
organization) United Steel, Paper & Forestry, Rubble 6 DECLARATE declare that I have read the above charge and that the statements of the	oer, Mfg., Energy, A ON into are true to the best of r asha Shapiro, Asst.	llied Indus. & Serv my knowledge and belief Gen. Counsel	4c. Cell No. 4d. Fax No. 4e. e-Mail crookstonk@gmail.com iiled in when charge is filed by a labor Workers Int'l Union Tel No. (412) 562-2355 Office, if any. Cell No. (412) 417-9677 Fax No. (412) 562-2574
organization) United Steel, Paper & Forestry, Rubble 6 DECLARATE declare that I have read the above charge and that the statements of the	oer, Mfg., Energy, A ON onis are true to the best of r asha Shapiro, Asst. (Printitype name and title	llied Indus. & Serv my knowledge and belief Gen. Counsel	4c. Cell No. 4d. Fax No. 4e. e-Mail crookstonk@gmail.com illed in when charge is filed by a labor Workers Int'l Union Tel No. (412) 562-2355 Office, if any. Cell No. (412) 417-9677

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

FORM NLRB-501

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

DO NOT WRIT	TE IN THIS SPACE
Case	Date Filed
27-CA-118499	12-6-13

dmiller@sawayalaw.com

EDBM EXEMPT INDER MILLS C 9512

[2-08] **CHARGE AGAINST EMPLOYER** INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring. 1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT b. Tel. No. (515) 576 - 4141 e. Name of Employer Decker Truck Line, Inc. c. Cell No. f. Fax No e. Employer Representative d. Address (Street, city, state, and ZIP code) Don Decker g. e-Mail 400 5th Avenue South President Fort Dodge, IA 50501 h. Number of workers employed approx. 500 j. Identify principal product or service i Type of Establishment (factory, mine, wholesaler, atc.) trucking services trucking company k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list subsections) (4) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alteged unfair labor practices) On about November 29, 2013, the above-named Employer threatened, coerced and interfered with employees in the exercise of Section 7 protected activity, when the Employer did not pay employees for the time during their shift that the New Belgium Brewery was shut down, contrary to a past practice of always doing so. The above-named Employer engaged in this action in retaliation for employees engaging in protected concerted activity concerning overtime pay and for employees participating in an NLRB investigation and proceedings. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) David Miller, Esq., The Sawaya Law Firm 4a. Address (Street and number, city, state, and ZIP code) (303)839-1650 x1090 1600 Ogden Street 4c. Call No. Denver, CO 80218 4d. Fax No. (720)235-4380 4e. e-Mail dmiller@sawayalaw.com 5. Full name of national or international labor organization of which it is an effliate or constituent unit (to be filled in when charge is filed by a labor organization) 6. DECLARATION (303)839-1650 x1090 s charge and that the statements are true to the best of my knowledge and belief. Office, if any, Cell No. David Miller, Esq. frigneture of rep (Print/type name and title or office, if any) Fax No. (720)235-4380 g-Mall

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

1600 Ogden Street, Denver, CO 80218

FORM EXEMPT UNDER 44 U 5 C 3812

INTERNET FORM NLR9-501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case Date Filed

27-CA-118558 12-6-13

	27-CA-	110000	12-6-13	
ISTRUCTIONS: its an original with NLRB Regional Director for the region in which	the alleged unfair labor practice occurred or	is occurring.		
1, EMPLOYER	AGAINST WHOM CHARGE IS BROU	IGHT		
a. Name of Employer	Control of the Control		II. No. 303-452-8894	
McDonalds Corporation joint employer with Bose	Illi Investments LLC and/or Don Ar	thony c. Ca	ll No.	
Boselli				
of the second of	management of more present while the freeze	f. Fa	No. 303-458-2807	
d. Address (Street, city, state, and ZIP code) 599 W. 104th Ave	e. Employer Representative Savannah Epstein	10 80	g, e-Mail	
Northglenn CO 80234	our amain apatem	3		
Training Emily South		h N	umber of workers employed	
		70.00		
Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	e.s. 351 mm		
food	fast food			
k. The above-named employer has engaged in and is engag				
subsections)			ons Act, and these unfair labor	
practices are practices affecting commerce within the mea within the meaning of the Act and the Postal Reorganizati		es are unfair prac	lices affecting commerce	
	10.00	to be a second or self	· · · · · · · · · · · · · · · · · · ·	
2. Basis of the Charge (set forth a clear and concise stateme			and any age of in protected	
On or about (b) (6), (b) (7)(C) 2013, the Employer dis	charged employee (b) (6), (b) (7)(C	because in	ad engaged in protected	
concerted activity				
3 Full name of party filing charge (if labor organization give Los Angeles Organizing Committee	full name, including local name and number	n		
Los Angeles Organizing Committee				
48. Address (Stract and number, city, state, and ZIP code)	-			
PO Box 555065		4b, Tel	No 242 254 2551	
Los Angeles CA 90055			213-251-3661	
cos / vigeles o/ vocos		4b, Tel	213-251-3661	
			No.	
		4c. Cell	No. (Np.	
		4c. Cell	No. (Np.	
er angelen and and a grant and		4c. Cell 4d. Fa 4e. e-M	213-25)-3661 No. (No.	
5 Full name of national or international labor organization organization)	f which It is an affiliate or constituent unit (fi	4c. Cell 4d. Fa 4e. e-M	213-25)-3661 No. (No.	
	f which It is an affiliate or constituent unit (fi	4c. Cell 4d. Fa 4e. e-M	213-25)-3661 No. (No.	
	1112 8000	4c. Cell 4d. Fa 4e. e-M	No. (No. ail charge is filed by a labor	
organization)	ON	4c. Cell 4d. Fa 4e, e-M be filled in when	No. (No. ail charge is filed by a labor	
organization) 6 DECLARATI I declare that I have read the above charge and that the statement	ON ints are true to the best of my knowledge and b	4c. Cell 4d. Fa 4e. e-M be filled in when Tel. No	No. (No. ail charge is filed by a labor	
organization) 6. DECLARATI I declare that I have read the above charge and that the statements By R	ON ints are true to the best of my knowledge and b ichard Rosenblatt	4c. Cell 4d. Fa 4e. e-M be filled in when Tel. No	213-251-3661 No. KNo. eill charge is filed by a labor 303-721-7399	
organization) 6 DECLARATI I declare that I have read the above charge and that the statement	ON ints are true to the best of my knowledge and b	4c. Cell 4d. Fa 4e, e-M be filled in when Tel. No	213-251-3661 No. KNp. ail charge is filed by a labor 303-721-7399	
organization) 6. DECLARATI I declare that I have read the above charge and that the statements By R	ON ints are true to the best of my knowledge and b ichard Rosenblatt (Frint/type name and title or office, if eny)	4c. Cell 4d. Fa 4e, e-M be filled in when Tel. No	No. No. No. Charge is filed by a labor 303-721-7399 f any, Cell No	
organization) 6. DECLARATI I declare that I have read the above charge and that the statements By R. R.	ON onts are true to the best of my knowledge and b ichard Rosenblatt Frintlype name and title or office. If any)	4c. Cell 4d. Fa 4e, e-M 4e, e-M Tel, No elief. Office, Fax No e-Mail	No. No. No. CND, ail charge is filed by a labor 303-721-7399 f any, Cell No	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

FORM EXEMPT UNDER 44 U.S.C 3517

INTERNET FORM NURE-501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

FORM CACINET DISCRASS SOL

DO NOT WRITE IN THIS SPACE

Date Filed Case CHARGE AGAINST EMPLOYER 27-CA-118923 12-13-13 INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unlast labor practice occurred or is occurring. 1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT b. Tal. No. 970 925-7523 a. Name of Employer United States Postal Service c. Cell No. f. Fax No. 970 925-5274 e. Employer Representative d. Address (Street, city, state, and ZIP code) g. e-Mall Reza Tehrani, Officer in Charge 235 Puppy Smith Street Aspen CO 81611-9998 h. Number of workers employed Hundreds of thousands i. Type of Establishment (factory, mine, wholeseler, etc.) Identify principal product or service Mail Distribution and Delivery Same as i k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list subsections) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices). On December 11, 2013, the above captioned Employer (b) (6), (b) (7)(C) retaliated against Union (b) (6), (b) (7)(C) (SM) for engaging in protected activity. While on (SM) break, (SM) recorded overstuffed and telescoping Post Office Boxes. [step] found 17 PO Boxes either telescoping from the PO Box or overstuffed to the point of damaging the mail. notified appropriate greyances. One above in order to receive union time to file the appropriate grievances. upset, and ordered on to pull the boxes thereby displacing on to from on daily assignment with a reasonable accomposation allowing [0](6)(6) to sit at the window duty station. When [0](6)(6)(6)(7)(7)(7)(6) attention, on the stated with know. The again ordered without to pull boxes after with break. When has prevailed in previous grievances regarding this matter. (b)(0)(0)(7)(0) total disregard for the previous settlement demonstrates (1) refuses to bargain in good faith. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) Western Colorado Area Local 600 4a. Address (Street and number, city, state, and ZIP code) 970 925-3820 PO Box 890 Aspen CO 81612-0890 4d. Fax No. 970 963-0956 48. e-Mail hankgray@sisna.com 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) American Postal Worker's Union AFL-CIO Tel No. 6. DECLARATION Same as above above charge and that the statements are true to the best of my knowledge and belief. Hank Gray (b) (6), (b) (7)(C (Printfyps name and file or office, if any) Fax No. Same as above e-Mail 12-11-2013 Same as above

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITIFI) STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

	FORM EXEMPT UNDER 44 US C 3512
DO NOT WRI	TE IN THIS SPACE
Case	Date Filed
27-CA-118993	12-13-13

ISTRUCTIONS:	27-	CA-118993	12-13-13	
le an original with NLRB Regional Director for the region in which	th the alleged unfair labor practice oc R AGAINST WHOM CHARGE I			
a. Name of Employer	A AGAINGT VILLONI CHANGE	b.	el. No. 303-444-0202	
Naropa University				
		c (cell No.	
			ex No.	
d. Address (Street, city, state, and Zi-2code) 2130 Arapahoe Dr. Boulder, CQ 80302	e. Employer Representative Charles Lief		-Mail	
			f@naropa.edu	
			Number of workers employed 150	
Type of Establishment (factory, mails, wholesaler, etc.) University	j. Identify principal product or service Higher Education			
. The above-named employer has engaged in and is engage		he meaning of section 8(a), subsections (1) and (list	
subsections) Section 8 (a) (1)			ions Act, and these unfait labor	
practices are practices affecting or immerce within the mea	aning of the Act, or these unfair labi			
within the meaning of the Act and the Postal Reorganization	on Act.			
2. Basis of the Charge (set forth a diver and concise statems	ent of the facts constituting the alleg	ged unfair labor practices;		
was suspended on the basis of engaging in a s	illent protest against institution	onal racism on the br	chalf of myself and others.	
b) (6), (b) (7)(C)	full name, including local name and	d number)		
a Address (Street and number, ral -, state, end ZIP code)		45 Te	Na (b) (6), (b) (7)(C)	
b) (6), (b) (7)(C)		4c Ce	4c Cell No.	
		4d. Fa	x No.	
		4c. c-N	lail	
		(b) (6	i), (b) (7)(C)	
Full name of national or international labor organization of inganization) 15. DECLARATION that the statements in the s		7/3	(6), (b) (7)(C)	
b) (6), (b) (7)(C) that the statement (b)) (6), (b) (7)	(C)Cffice.	of any, Ceil No.	
(b) (c) (b) (=	7\/(0)	8-13-1-13 E-Mail	(0) (1) (7) (6)	
$_{\text{\tiny ddress}}$ (b) (6), (b) (7		(b)	(6), (b) (7)(C	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. GODE, TITLE 18, SECTION 1991)

PRIVACY ACT STATEMENT

FORM EXEMPT UNDER 44 U.S.C. 3612

INTERNET FORM NURB-601 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRIT	E IN THIS SPACE
Case	Date Filed
27-CA-119101	12-16-13

NSTRUCTIONS: ille an original with NLRB Regional Director for the region in which 1 EMPLOYER		119101	12-16-13	
	the alleged unfeir labor practice occurred or			
The state of the s	AGAINST WHOM CHARGE IS BROL	JGHT		
a. Name of Employer		b. To	No. 303-452-8894	
McDonalds Corporation joint employer with/or Bo Anthony Boselli	selli Investment LLC and/or Dona	c. C	ell No	
		1 Fo	K No. 303 458 3807	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative		x No. 303-458-2807	
599 W. 104th Ave Northglenn CO 80234	Savannah Epstein	g, e-	g. e-Mall	
Canada Maria		h. N	umber of workers employed	
i. Type of Establishment (factory, mine, wholesaler, etc.) retail food	j. Identify principal product or service fast food		They must be the same tool	
k. The above-named employer has engaged in and is engagin	ng in unfair labor practices within the mean	ing of section 8(a)	, subsections (1) and (list	
subsections)	of the Na	Ilonal Labor Relati	ons Act, and these unfair labor	
practices are practices affecting commerce within the mean within the meaning of the Act and the Postal Reorganization		es are unfair prac	tices affecting commorce	
2. Basis of the Charge (set forth a clear and concise statemen	nt of the facts constituting the alleged unfa	ir labor practices)		
On or about (0.6) (0.70) 2013, the Employer reduced	경기에 가는 일을 다시다고 있는데 그 사람이 보고 있다면 하는데 이번 하는데 바람이 되었다면 하다.		(C) and then terminated	
on (b) (6), (b) (7)(C) 2013. The Employer look the				
activity.	be action a agent of	cligage	in protested conserved	
activity.				
3. Full name of party filing charge (If labor organization, give	full name, including local name and numbe	ng .		
3. Full name of party filing charge (if labor organization, give of St. Louis Organizing Committee	full name, including local name and number	rr)		
3. Full name of party filing charge (if labor organization, give of St. Louis Organizing Committee 4a. Address (Street and number, city, state, and ZIP code)	full name, including local name and number	Ab. Tel.	No. 314-330-3515	
	full name, including local name and number	Ab. Tel.	314-330-3515	
4a. Address (Street and number, city, state, and ZIP code)	full name, including local name and numbe	4b. Tel.	No.	
4a. Address (Street and number, city, state, and ZIP code) 438 North Skinker Blvd.	full name, including local name and numbe	Ab. Tel.	No.	
4a. Address (Street and number, city, state, and ZIP code) 438 North Skinker Blvd.	full name, including local name and number	4b. Tel.	No.	
4a. Address (Street and number, city, state, and ZIP code) 438 North Skinker Blvd.		4c. Cell 4c. Fax 4e. c-M	No. No. No.	
4a. Address (Street and number, city, state, and ZIP code) 438 North Skinker Blvd. St. Louis, MO 63130 5. Full name of national or international labor organization of organization)	which it is an affiliate or constituent unit (to	4b. Tel. 4c. Cell 4d. Fax 4e, c-M	No. No. No. end end charge is filled by a labor	
4a. Address (Street and number, city, state, and 2IP code) 438 North Skinker Blvd. St. Louis, MO 63130 5. Full name of national or international labor organization of	which it is an affiliate or constituent unit (to	4b. Tel. 4c. Cell 4d. Fax 4e, c-M	No. No. No. end end charge is filled by a labor	
4a. Address (Street and number, city, state, and ZIP code) 438 North Skinker Blvd. St. Louis, MO 63130 5. Full name of national or international labor organization of organization) 8. DECLARATIO	which it is an affiliate or constituent unit (to IN its are true to the best of my knowledge and both chard Rosenblatt, Rosenblatt & Go	4b. Tel. 4c. Cell 4d. Fax 4e. c-M be filled in when Tel. No	No. No. No. charge is filed by a labor	
4a. Address (Street and number, city, state, and ZIP code) 438 North Skinker Blvd. St. Louis, MO 63130 5. Full name of national or international labor organization of organization) 8. DECLARATIO	which it is an affiliate or constituent unit (to IN its are true in the best of my knowledge and b	4b. Tel. 4c. Cell 4d. Fai 4e. c-M Tel. No. ellef. Office, i	No. No. No. ail charge is filed by a labor 303-721-7399	
4a. Address (Street and number, city, state, and ZIP code) 438 North Skinker Blvd. St. Louis, MO 63130 5. Full name of national or international labor organization of organization) 8. DECLARATIO I destate that I have read the above charge and that the statements	which it is an affiliate or constituent unit (to IN its are true to the best of my knowledge and be Chard Rosenblatt, Rosenblatt & Go (Pantaype name and fille or office, if any)	4b. Tel. 4c. Cell 4d. Fax 4e. c-M be filled in when Tel. No ellef. Office, i	No. No. No. Sharpe is filed by a labor 303-721-7399 fany, Cell No.	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

Solicitation of the Information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seg. The principal use of the information is to assist the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seg. The principal use of the information is to assist the Federal Register, 71 Fod Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is information are fully set forth in the number of the information will cause the NLRB to decline to invoke its processes.